### PART B - FEE(S) TRANSMITTAL

(	DEC 27. 2005	this form, together wi		or	Comm P.O. B Alexar <u>Fax</u> (571) 2	ox 1450 Idria, Virg 73-2885	or Patents ginia 22313-1450	J	
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12/2	& NYDEGGER 348 OLIVE STRE SAN DIEGO, CA 3/2005 EAREGAY2 000	EET 92103	98		I hereby States Po addressed transmitt	Ce certify that the stal Service if to the Ma and to the USI	rtificate of Mailing or Transhis Fee(s) Transmittal is bein with sufficient postage for finite Stop ISSUE FEE address PTO (571) 273-2885, on the	smission g deposited with the United st class mail in an envelope above, or being facsimile date indicated below.	
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03 F(	C:8001 60.0	0 DA 30.00 OP			Desc	ember 2	Li , 2005	(Date)	
Γ	APPLICATION NO.	FILING DATE	FIRST NA		MED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
٠-	10/634,298		Herbert R. Radisch JR.			10745.137.2	7962		
T1	TLE OF INVENTION: S  APPLN. TYPE	SEGMENTED BALLOON C	ATHETER BLAD		PUBLICATION	ON EEE	TOTAL FEE(S) DUE	DATE DUE	
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_	nonprovisional NO		\$1400		\$300		\$1700	02/01/2006	
L	EXAMINER		ART UNIT		CLASS-SUB	CLASS	J		
	BAXTER, JESSICA R		3733		606-194	000			
Ċi	1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  1 NYDEGER & ASSOCIATES				
3.	PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN	_	elow, no assignee of this form is NO	data will app T a substitute 3) RESIDEN(	• • • • • • • • • • • • • • • • • • • •	ATE OR CO	nee is identified below, the d	locument has been filed for	
Pl	ease check the appropriate	e assignee category or catego	ries (will not be pr	inted on the r	natent): 🔲 Indi	vidual 🔽 C	orporation or other private gr	oun entity Government	
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	Authorized Signature	Deil K. Alya O	w					005	
	Typed or printed name _	self)	Registration No. 30,202						
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#### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

1	
·	Art Unit 3733
Filed: August 5, 2003 )	) )
For: SEGMENTED BALLOON CATHETER BLADE	
Examiner: Jessica R. Baxter )	
Date of Notice ) of Allowance: November 1, 2005 )	
Customer No: 23862	
Attorney Docket: 10745.137.2 )	

## TRANSMITTAL OF PAYMENT OF ISSUE FEE

Mail Stop Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

The enclosed Notice of Allowance and Issue Fee Due are submitted herewith. Also enclosed is check No. 17634 for \$1,730.00 for the payment of the issue fee and the publication fee which is due in this matter, including the cost for additional copies of the patent when it issues. Please credit any overpayment or charge any additional fees to Deposit Account 14-1519 of the undersigned. Triplicate copies of this sheet are enclosed.

Please address all future correspondence in connection with the above-identified patent application to the attention of the undersigned.

DATED this <u>U</u><sup>8</sup> day of December, 2005.

Respectfully submitted,

NEIL K. NYDEGGER Attorney for Applicant Registration No. 30,202

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## CERTIFICATE OF MAILING UNDER 37 CFR §1.8

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Issue Fee, Commissioner for Patents, Alexandria, VA 22313-1450, on this 2180 day of December, 2005.

JENNY L. STEDMAN Legal Document Assistant

Transmitted:

Payment of Issue Fee; Check No. 17634 in the amount of \$1,730.00 for payment of issue fee and the publication fee and for advance

copies of patent when issued; and Issue Fee Transmittal.

Docket: 10745.137.2